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Total # of Pages 10 (including this page)

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From : Sanjeev K. Dhand
Email Address : sdhand@foley.com
Sender's Direct Dial : 858.847.6860
Date : April 23, 2007
Client/Matter No : 024827-2701
User ID No : 5874

MESSAGE:

Re: U.S. Patent Application Number 10/600,295

Attached Please Find:

- 1) Notice of Appeal in 3 pages
- 2) PTO/SB/33 Form in 1 page
- 3) Pre-Appeal Brief Request for Review in 4 pages
- 4) Credit Card Payment in 1 page

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Cover Page 1 of 1

DLMR_304225.1

PAGE 1/10 * RCVD AT 4/23/2007 5:23:35 PM [Eastern Daylight Time] * SVR:USPTO-EFXXRF-3/1 * DNIS:2738300 * CSID: * DURATION (mm-ss):02:56

Atty. Dkt. No. 024827-2701

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: John Wu

Title: SYSTEMS AND METHODS FOR
REGISTERING A CLIENT
DEVICE IN A DATA
COMMUNICATION SYSTEM

Appl. No.: 10/600,295

Filing Date: 6/20/2003

Examiner: Anh Vu H Ly

Art Unit: 2616

Confirmation 6301
Number:

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Julienne P. Bult (Printed Name) (Signature) 4/23/07 (Date of Deposit)
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**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner in the Final Office Action dated October 26, 2006, finally rejecting Claims 1-10, 13-40, 42-50.

☒ Applicant claims small entity status.

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

☒ Notice of Appeal Fee

04/24/2007 TL0111 00000027 10600295

01 FC:2401
02 FC:2253250.00 OP
510.00 OP

Atty. Dkt. No. 024827-2701

☒ To be paid as detailed below☐ Not required (Fee paid in prior appeal)RECEIVED
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The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$500.00
<input checked="" type="checkbox"/>	Extension for response filed within the third month:	\$1020.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$1,520.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$760.00
	TOTAL FEE:	\$760.00

A credit card payment form in the amount of \$760.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

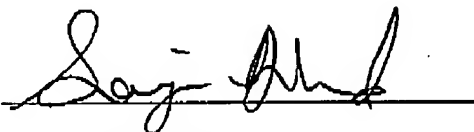
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Atty. Dkt. No. 024827-2701

Respectfully submitted,

Date April 23, 2007

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By 

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